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APPLICANTS

Eric A. Foreman, Fairfax, VT;  
 Peter A. Habitz, Hinesburg, VT;  
 David J. Hathaway, Underhill, VT; Jerry D. Hayes, Milton, VT;  
 Anthony D. Polson, Jericho, VT;

\*\* CONTINUING DATA \*\*\*\*\*  
*None TL*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None TL*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged Allowance <i>C. Hays</i> Examiner's Signature <i>TL</i> Initials	STATE OR COUNTRY VT	SHEETS DRAWING 8	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 4
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ADDRESS  
 29625  
 MCGUIRE WOODS LLP  
 1750 TYSONS BLVD.  
 SUITE 1800  
 MCLEAN, VA  
 22102-4215

TITLE  
 METHOD AND SYSTEM FOR EVALUATING TIMING IN AN INTEGRATED CIRCUIT

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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